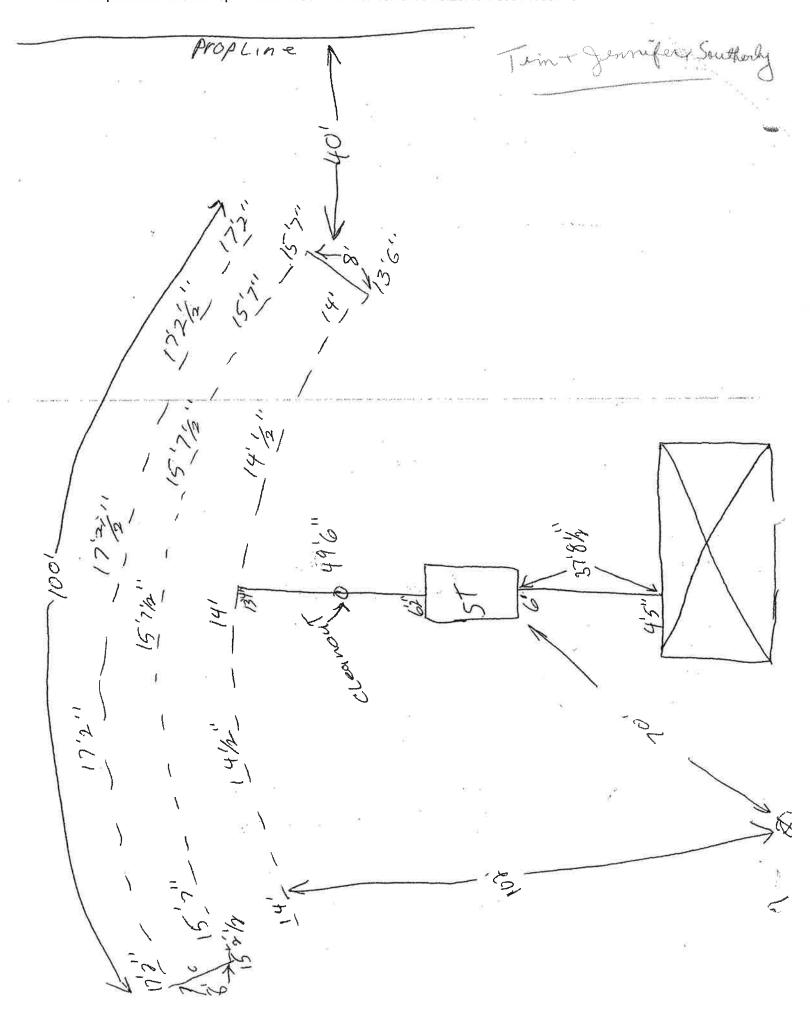
1	
	177
Kev	ised 1-71 WEST VIRGINIA SEPTIC TANK INSPECTION FORM
	Nampohine County Health Department Installation Permit No. 57-14-95-473
The	
	Address HC 79 Box 360 Kommy, WY 26757
	Property Address
	DESCRIPTION & NUMBER OF UNITS SERVED
	Type Facility Served No. Water Closets
	Lot Size 3.57 sq. ft. Area suitable for sewage disposal installation sq.
	Source of Water Supply No. Lavatories
	No. Bedrooms 3 No. Showers or Tubs No. Baths
	No. Garbage Grinders No. Automatic Washers
	SEPTIC TANK
	Material Concrete Length x Width x Depth = cubic feet
	Liquid Depth ft. Liquid Capacity gal.
See	Distance to: Dwelling 37'8% Water Supply 70' Nearest Property Line 90'
	SOIL ABSORPTION SYSTEM
	Type Drain Line Material Muellos Trench Width 24 Inches
	Trench Depth 24 Inches Total Absorption area in Trench Bottom 900 sq. ft.
	Diameter of Drain Line /O Inches Type Filter Media
	No. of Drain Lines Depth Filter Media Under Drain Line Inches
	Length of Each Line 100,100,100, ft. Depth Filter Media Over Drain Line
	Distance of Disposal Field to: (a) Dwelling
	(b) Water Supply 102' (c) Nearest Property Line 40'
	An inspection of the septic tank system described herein disclosed that said system (MEETS, DOES NOT MEET) the minimum standards established by the West Virginia State Department of Health.

SKETCH OF SYSTEM TO BE DRAWN ON BACK

Sanitarian

Date

Note: Copy of this inspection report must be given to owner and the original filed in the Health Department files. PERMANENT RECORD - DO NOT DESTROY.



No. 23.95

WV STATE DEPARTMENT OF HEALTH Office of Environmental Health Services ENVIRONMENTAL ENGINEERING DIVISION

WELL COMPLETION REPORT

Date(s)	12-95	_ County Harry	SKIRE	Permit	#: DW-14-0	16-95-231
Town: Kom	A EV	Area Name/Loca	1 ./ ///	u Sub		
Well Owner:	in Southerly	111	Address:	4074 Box 7	13B	
Telephone Numbe	304-872	-5719	<i>`</i>	Romney W.V.	26157	
Well Driller:	ANDAL C. Mi	1/e/	Address:	(+#) Box 186		
Telephone Numbe	304-738-	3266			V. 26753	
WELL LOG		2 3	* **	0 01		
DEPTH IN FEET	FORMATIONS; KIND, THICKNESS, AND	IF WATER BEARING	REMARKS: PES	sure Groute	b	^ '
0-9'	RED State (INCONCOL do	1	1	Drilling Method:	TR ROTARY HAMMER
9'	BluE SANDERON	E (Redrock	Well Diameter:	11/4	Casing O.D.:	
20'	BluE Sandton	771 7	•		Date Completed: 2	1-12-95
4	Sot Casina	Observation in the Conservation	Control of the state of the sta	n 2/ Feet	Height above gr	1
182'	BlUE SAVE	ONE CLATER	b/ \	March and March		Cast Iron
355	BluE SANDE	THE CONSOLE	10 1	Other	astic <u> </u>	Qast Hon
	Stoppe DR	5/12	~~	00101	Туре	
	V	9	SCREEN	=:		
Nice of the Control o			None Installed			
	* *				Piameter	
~~~		7115 5410 4 041011	Slot/Gauge		Length	
			Set Between		Ft. and	
			200 200			(Ma)
PUMPING OR BAIL	ING TEST	ş	WELL HEAD			
DE	ETAILS	#1 #2 #3	Pitless Adapter: T	ype, Make, Etc		
Static Water Leve	l (Ft. Below Grade)	120		lake, Etc. Kouse	- Condust 7	TIPE
Pumping Rate (GPM)			Well Seal: Type, M		0	<i>7</i> ′
Pumping Level (Ft Below Grade)			Well Platform:			
Duration of Test (In Hours)			Length	Width	Thic	kness
Recovery Time to	Static Level (In Hours)	6	Grouting: Yes	€ □ No upplies must be grou	ited	
hereby certify that i	this well was drilled and o	constructed under m		-		d permit, and that this record
a u de to me best of	f my knowledge and beli	UI. de la state	fairly (	1/1/1/2	12	422
			Name / //p-	Ray Do	110	Certification No.
		N1 2	Registered Busings	Name ///	uing	7 10 00
Control of the Contro			Signed C	· / hlx		7-12-95 Date
		S	8 2 3 U			